

**State of Rhode Island**

Division of Taxation
One Capitol Hill
Providence, RI 02908-5800

**TAX AMNESTY APPLICATION**

(General information and instructions on back)

Rhode Island has established a Tax Amnesty Program beginning on July 15, 2006 and ending September 30, 2006. Civil and criminal penalties will be waived for a taxpayer who applies for amnesty during the amnesty period and pays the full amount of tax and interest computed at the rate of twelve percent (12%) annually from the due date to date of payment.

Section I: Type or Print Name, Mailing Address and Tax Identification Number.

Taxpayer name		Social Security # or Tax Identification #	Sales Tax Permit #
Spouse's name (if joint income tax application)		Social Security #	
Business name (if different from above)			
Mailing Address (include apt., office or unit #, if any)			
City, Village, or Post Office		State	Zip Code
Provide a name (if different from taxpayer named above) and telephone number where we may reach you during weekdays.		name	
between 8:30 a.m. and 4:00 p.m. if additional information is needed.		() telephone number	

Section II: Indicate Tax Period, and Amounts Due for Each Period

A	B		C	D	E
tax type	period of return		enter amount of tax	enter amount of interest	enter amount of Total (C+D)
	beginning	ending			
<input type="checkbox"/> check box if continuation sheet is attached	Totals				
	Total from continuation sheet				
	Total due				

Section III: Sign this application

Under penalties of perjury, I declare that I have examined this form, including any accompanying returns and schedules, and to the best of my knowledge they are correct and complete. I also declare that to the best of my knowledge I am not under criminal investigation, or a party to any civil or criminal litigation pending in any court of the United States or the State of Rhode Island for fraud relative to any state tax collected by the Tax Administrator.

I apply for the amnesty on the items listed above, and enclose a payment of \$_____.

Signature of taxpayer or authorized agent _____ date _____

Spouse's signature (if joint income tax application) _____

Title of Authorized Agent _____

if Corporation, Signature of Authorized Officer _____ date _____

Title _____

TAX AMNESTY - GENERAL INFORMATION

What is Tax Amnesty?	Tax Amnesty is an opportunity for taxpayers to pay back taxes without penalty or criminal prosecution. It includes tax liabilities for taxable periods ending before December 31, 2005
Who is eligible for Tax Amnesty?	Individual taxpayers, corporations, or other entities which owe any tax imposed by law and collected by the Tax Administrator.
Who is not eligible for Tax Amnesty?	Amnesty will not be granted to taxpayers who are a party to any criminal investigations or to any civil or criminal litigation which is pending in any court of the United States or the State of Rhode Island for fraud in relation to any state tax imposed by any law of the State of Rhode Island and collected by the Tax Administrator.
What taxes are eligible for Tax Amnesty?	All state taxes imposed by the State of Rhode Island and collected by the Tax Administrator.
What is the applicable interest rate?	Interest is to be computed at the rate of twelve percent (12%) annually from the due date to the time of payment.
Where to obtain forms and assistance?	To obtain additional amnesty applications, tax forms or general information call (401) 222-2957. All tax forms are also available on the Tax Division Website www.tax.ri.gov
How to apply and pay?	You must send in a completed application along with all returns and payment for the entire amount of tax and interest owed on the eligible returns listed. If payment in full creates a severe hardship, you may apply for installment payments. Any installment agreement based on financial hardship must be approved by the Tax Administrator during the seventy-five (75) day amnesty period. Contact the Tax Amnesty section at (401) 222-2957.

INSTRUCTIONS ON HOW TO APPLY FOR TAX AMNESTY

Complete past due tax returns. Amend any incorrect returns by disclosing all unreported tax liabilities.

Section I	Use current information. For personal income tax, enter name and social security number. For joint personal income tax applications also enter information on spouse.	Column B	Enter the tax period, tax year or date the tax liability was incurred.
	For all other taxes enter taxpayer name and applicable tax identification number (social security/employer identification /sales tax permit). For taxes owed by a business, enter the business name.	Column C	Enter the amount of tax due from your tax return.
	Enter present mailing address. Include name of individual authorized to receive mail if different than the taxpayer name.	Column D	Enter the amount of interest due. (Compute interest at the rate of 12 percent (12%) annually from the due date to time of payment.)
		Column E	Add tax (Column C) plus interest (Column D) and enter total due. Attach a continuation sheet if additional space is needed.
Section II	Complete as follows:	Section III	Sign this application and all attached tax forms. Make check or money order payable to "Rhode Island Division of Taxation." Include your social security number or other tax identification number on all payments.
Column A	Enter type of eligible tax (ei. personal income/sales and use/motor fuel).		

Mail Tax Amnesty application, tax forms and payment to:
Tax Amnesty
State of Rhode Island
Division of Taxation
One Capitol Hill
Providence, RI 02908-5800

If you cannot obtain the required tax forms to make a timely filing by **September 30, 2006** complete the application making your best estimate of the taxes due, sign the application and enclose payment. You will then be furnished with the required tax forms to provide complete information.